Under the Pa	perwork Reduction Act o	of 1995, no person are	required to	U.S. Paten	t and Trade	oved for use througl mark Office; U.S. Di ation unless it displa	h 06/30/2010.  C EPARTMENT O	F COMMERCE	
Effective on 12/08/2004.				Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number		10/582,385-Conf. #2824				
FEE TRANSMITTAL			Filing Date		August 15, 2007				
For FY 2009			First Named Inventor		Marco Antonio SANTINI				
101112003				Examiner Name N		M. S. Mercier			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit ´		1615			
TOTAL AMOUNT OF PAYMENT (\$) 180.00				Attorney Docket No. 4		4705-0121PUS1			
METHOD OF	PAYMENT (check	all that apply)						***************************************	
Check Credit Card Money Order None Other (please identify):  X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCUL	The same state of the same sta			, , , , , , , , , , , , , , , , , , ,	######################################				
1. BASIC FILING	S, SEARCH, AND E	XAMINATION FE	ES		W. Salan				
	F	LING FEES	SEA	ARCH FEES	EXAMII	NATION FEES	3		
Application Ty	pe Fee (S	Small Entity  S) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)	
Utility	330		540	270	220	110	10031	πα (φ)	
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325		***************************************	
Provisional	220	110	0	0	0	0			
2. EXCESS CLA	IM FEES		_	-	•	U	5	mall Entity	
<u>Uman</u>								Fee (\$)	
Each claim over 20 (including Reissues)							52	26	
Each independen				220	110				
Multiple depende	ent claims						390	195	
Total Claims	Extra Claim 49 or HP	s Fee (\$)	Fe	e Paid (\$)	Multiple Depende		lent Claims		
10	13 - <sup>49</sup> or HP   x = HP = highest number of total claims paid for, if greater than 20.			www.townsty.	<u>Fe</u>	e (\$)	Fee Paid (\$)		
Indep. Claims			г.	- Daid (A)				-	
	Extra Claim  or HP =	s <u>Fee (\$)</u>		e Paid (\$)					
	er of independent claims	paid for, if greater than	n 3.						
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets				iditional 50 or frac	tion thereo	f Fee (\$)	Fee Pa	aid (\$)	
- 100 = /50 = (round up to a whole number) x =									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00									
SUBMITTED BY									
Signature	(AI				36,623	Telephone	Telephone (858) 356-5959		
Name (Print/Type) Mark J. Nuell						Date October 23, 2009			